Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

| Lifective October 1, 2005                                                             |                                            |                                                                                         |                                   |                                  |              |                                     |          |                   | 10, to                 | 33, | 184.                       |                        |
|---------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------|----------------------------------|--------------|-------------------------------------|----------|-------------------|------------------------|-----|----------------------------|------------------------|
|                                                                                       |                                            | CLAIMS A                                                                                | S FILED - PART I<br>(Column 1)    |                                  | (Column 2)   |                                     |          | SMALL ENTITY TYPE |                        | OR. | OTHER THAN OR SMALL ENTITY |                        |
| TOTAL CLAIMS                                                                          |                                            |                                                                                         | 150                               |                                  |              |                                     | RA1      | Ε                 | FEE                    | 7   | RATE                       | FEE                    |
| FOR                                                                                   |                                            |                                                                                         | NUMBER FILED                      |                                  | NUMBER EXTRA |                                     | BASIC    | FEE               | 385.00                 | OR  | BASIC FEE                  | 770.00                 |
| TOTAL CHARGEABLE CLAIMS                                                               |                                            |                                                                                         | 150 minus 20=                     |                                  | · 130        |                                     | XS s     | 9=                |                        | OR  | X\$18=                     | 2340                   |
| INDEPENDENT CLAIMS                                                                    |                                            |                                                                                         | 4 m                               | inus 3 =                         | *            |                                     | X43      | }=                |                        | OR  | X86=                       | 86                     |
| М                                                                                     | JLTIPLE DEPEN                              | NDENT CLAIM P                                                                           | RESENT                            | ,                                |              |                                     | +145     | <br>ō≃            |                        | OR  | +290=                      |                        |
| * If the difference in column 1 is                                                    |                                            |                                                                                         | less than zer enter "0" in        |                                  |              | column 2                            | TOT      | AL                |                        | OR  | TOTAL                      | 3196                   |
|                                                                                       | C                                          | Column 1)                                                                               | MENDE                             | D - PAR <sup>®</sup><br>(Colun   |              |                                     |          | SMALL ENTITY      |                        | OR  | OTHER<br>SMALL             |                        |
| AMENDMENT A                                                                           |                                            | CLAIMS<br>REMAINING<br>· AFTER<br>AMENDMENT                                             |                                   | HIGH<br>NUME<br>PREVIC<br>PAID I | BER<br>OUSLY | PRESENT<br>EXTRA                    | RATE     |                   | ADDI-<br>TIONAL<br>FEE |     | RATE                       | ADDI-<br>TIONAL<br>FEE |
|                                                                                       | Total                                      | *                                                                                       | Minus                             | **                               |              | =                                   | XS 9     | )=                |                        | OR  | X\$18=                     |                        |
|                                                                                       | Independent                                | *                                                                                       | Minus                             | ***                              |              | =                                   | X43      | _                 |                        | OR  | X86=                       |                        |
| L                                                                                     | FIRST PRESENTATION OF MULTIPLE DEPENDENT C |                                                                                         |                                   |                                  | CLAIM        |                                     | ]        |                   |                        |     | .200                       |                        |
|                                                                                       |                                            |                                                                                         |                                   |                                  |              |                                     | +145     | =<br>TAL          |                        | OR  | +290=                      |                        |
|                                                                                       |                                            |                                                                                         |                                   |                                  |              |                                     |          | EE                | •                      | OR  | ADDIT. FEE                 | <u> </u>               |
| _                                                                                     | <del></del>                                | (Column 1)                                                                              | <b>T</b>                          | (Colun                           |              | (Column 3)                          | 1        |                   | ·                      |     |                            |                        |
| AMENDMENT B                                                                           | -                                          | REMAINING<br>AFTER<br>AMENDMENT                                                         |                                   | NUME<br>PREVIO<br>PAID I         | BER<br>OUSLY | PRESENT<br>EXTRA                    | RAT      | E                 | ADDI-<br>TIONAL<br>FEE |     | RATE                       | ADDI-<br>TIONAL<br>FEE |
|                                                                                       | Total                                      | *                                                                                       | Minus                             | **                               |              | = .                                 | xs 9     | =                 | •                      | ÖR  | X\$18= .                   |                        |
|                                                                                       | Independent                                | *                                                                                       | Minus                             | ***                              |              | =                                   | X43      | =                 |                        | OR  | X86=                       |                        |
| L                                                                                     | FIRST PRESE                                | FIRST PRESENTATION OF MUL                                                               |                                   |                                  | CLAIM        |                                     | ]        |                   |                        |     | 200                        |                        |
| •                                                                                     |                                            |                                                                                         |                                   |                                  |              |                                     | 45       | =<br>TAL          |                        | OR  | +290=                      |                        |
|                                                                                       |                                            |                                                                                         |                                   |                                  |              |                                     | 7001.    |                   | <del>~</del>           | OR  | ADDIT. FEE                 | <u> </u>               |
|                                                                                       |                                            | -                                                                                       |                                   |                                  |              |                                     | •        |                   |                        |     |                            |                        |
| AMENDMENT C                                                                           |                                            | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                                               |                                   | HIGHE<br>NUME<br>PREVIO          | BER<br>JUSLY | PRESENT<br>EXTRA                    | RATI     | Ξ                 | ADDI-<br>TIONAL<br>FEE |     | RATE                       | ADDI-<br>TIONAL<br>FEE |
|                                                                                       | Total                                      | *                                                                                       | Minus                             | **                               |              | =                                   | XS 9     | =                 |                        | OR  | X\$18=                     |                        |
|                                                                                       | Independent                                | *                                                                                       | Minus                             | ***                              |              | =                                   | X4.3:    | _                 |                        |     | X86=                       |                        |
| ٩                                                                                     | FIRST PRESENTATION OF MULTIPLE DEPENDENT   |                                                                                         |                                   |                                  | CLAIM        |                                     | ]        |                   |                        | OR  | 7.00                       |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |                                            |                                                                                         |                                   |                                  |              |                                     | +145     |                   |                        | OR  | +290=                      |                        |
| ***                                                                                   | f the "Highest Nur<br>f the "Highest Nur   | mn 1 is less than th<br>mber Previously Pa<br>mber Previously Pa<br>ber Previously Paic | id For" IN THI<br>iid For" IN THI | S SPACE is<br>S SPACE is         | less that    | n 20, enter "20,<br>n 3, enter "3." | ADDIT, 1 | EE L              | rooriale box           |     | TOTAL<br>ADDIT, FEE        |                        |
| ,                                                                                     | THE THY HEST NOTE                          | out i reviously rail                                                                    | J. O. LIDIAL OI                   | wachenge                         | 1111 13 1116 | mynest nombe                        |          | - 1-P             | - pinaro box           |     |                            |                        |